

CONSULTATIVE ASSESSMENT SERVICES

Consultative Assessment Services are provided when a behavior support plan is developed and implemented to assist individuals in maintaining their current living environment while ensuring their safety and the safety of others. The assessment, plan development and plan implementation services are not covered by Medicaid for individuals over 21 years or other behavioral health insurance benefits. CCS are necessary to improve the participant's independence and inclusion in their community. Consultation activities are provided at the direction of a Licensed Independent Mental Health Practitioner (LIMHP), Licensed Psychologist, or Advanced Practice Registered Nurse (APRN).

A functional behavioral assessment including level of risk is necessary in order to address problematic behaviors in functioning that are attributed to developmental, cognitive and or communication impairments. Observations where the participant lives, and/or takes part in day services or other activities are conducted at any time of the day or night in person or by Telehealth, depending upon when and where the specific problematic behaviors are shown. The current interventions are documented, and efficacy assessed. Best practices in intervention strategies, medical and psychological conditions, and/or environmental impact to service delivery are provided to the participant's team. Behavioral interventions are developed, piloted, evaluated, and revised, as necessary. The purpose is to provide support to the participant, using positive behavior support and non-physical crisis intervention that can keep the participant safe.

Consultative Assessment Services is self-directed.

Scope and Limitation

- Consultative Assessment Services are available for any adult participant.
- The amount of prior authorized services is based on the participant's need as documented in the service plan and is within the participant's approved annual budget.
- Consultative Assessment Services are reimbursed at an hourly unit for up to 5 hours per month.
- Transportation and lodging is included in the reimbursement rate.
- Consultative Assessment Services shall not overlap with, supplant, or duplicate other services provided through Medicaid State plan or HCBS Waiver services.
- The provision of Consultative Assessment Services will be provided by a Licensed Independent mental health practitioner, licensed psychologist or Advanced Practice Registered Nurse.
- This service is a team approach in which the service will include a functional behavior assessment including risk levels, the development of a behavior support plan, development of other habilitative plans, training and technical assistance to carry out the plan and treatment integrity support to the participant and the provider in the ongoing implementation of the plan.
- Behavior support plan data with analysis must be documented and accessible in THERAP or submitted to the service coordinator and Division at the frequency approved in the service plan.

- Consultants providing this service must attend either by via telecommunication (phone or Telehealth) or in person a minimum of two service plan meetings per ISP year. More frequent attendance may be necessary based on frequency of High General Event Record (GER) reporting.

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